

2684

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/001,650 Confirmation No.: 2019
Applicant : Li Fung Chang
Filed : October 31, 2001
T.C./A.U. : 2684
Examiner : Khai Minh Nguyen

Docket No. : ATT-042PUS
Customer No. : 022494

Certificate of Mailing (37 C.F.R. 1.8(a))

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16 Dec 04Date of Signature
and Mail Deposit

By:

Paul D. Durkee
Reg. No. 41,003RESPONSE

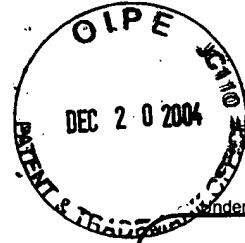
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Dear Sir:

In response to the Official Action dated October 1, 2004, please amend the above-identified patent application as follows.

Amendments to the Claims are reflected in the listing of claims beginning on page 2 of this paper;

Remarks/Arguments begin on page 6 of this paper.



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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/001,650		
Filing Date	October 31, 2001		
First Named Inventor	Li Fung Chang		
Art Unit	2684		
Examiner Name	Khai Minh Nguyen		
Total Number of Pages in This Submission	7	Attorney Docket Number	ATT-042PUS

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Appeal Notice, Brief, Reply Brief
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Return Postcard
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Daly, Crowley & Moford, LLP		
Signature			
Printed name	Paul D. Durkee		
Date	16 Dec 04	Reg. No.	41,003

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Signature			
Typed or printed name	Paul D. Durkee	Date	16 Dec 04

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